



CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

on 11.12.04.

Gloria Simmons
Gloria Simmons

In Re Application of:

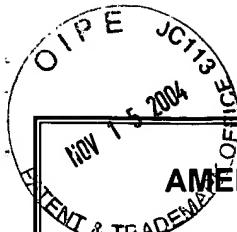
Roback, et al. Confirmation No.: 7152
Serial No.: 09/773,826 Group Art Unit: 1743
Filed: January 31, 2001 Examiner: Cross, Latoya I.
Docket No.: 050508-1030

For: **Immunological Assay System and Method**

The following is a list of documents enclosed:

Return Postcard
Second Response to Office Action (with Amendments)
Amendment Transmittal Form (in duplicate)
Petition for Extension of Time Under 37 CFR
Authorization to Charge Deposit Account in the amount of \$55.00 for filing fee(s)

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.



AMENDMENT TRANSMITTAL LETTER (LARGE)

Applicant(s): Roback et al.

Docket No.

050508-1030

Serial No.
09/773,826

Filing Date
January 31, 2001

Examiner
Cross, Latoya I.

Confirmation No.
7152

Group Art Unit
1743

Invention: Immunological Assay System and Method

Commissioner for Patents
Mail Stop
P.O. Box 1450
Alexandria VA 22313-1450

Transmitted herewith is Second Response to Office Action (with Amendments) in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	13 -	29 =	0	X \$9.00	\$ 0.00
INDEP. CLAIMS	2 -	3 =	0	X \$44.00	\$ 0.00
Multiple Dependent Claims (check if applicable)				\$150.00	\$ 0.00
EXTENSION FEE	1 ST MONTH <input checked="" type="checkbox"/> \$55.00	2 ND MONTH <input type="checkbox"/> \$215.00	3 RD MONTH <input type="checkbox"/> \$490.00	4 TH MONTH <input type="checkbox"/> \$765.00	\$55.00
Other Fees:					\$ 0.00
				TOTAL ADDITIONAL FEE FOR THIS AMENDMENT	\$55.00

No additional fee is required.

Please charge Deposit Account No. 20-0778 in the amount of \$55.00. A duplicate copy of this page is enclosed.

A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed.

A Credit Card Payment Form PTO-2038 is attached in the amount of \$ _____.

The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.

Cynthia J. Lee, Reg. No. 46,033

11/11/04

Date